

United States of America  
Department of Transportation — Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA1347SW

*This certificate, issued to* Vought Aircraft Service Company  
Meacham Field  
Fort Worth, Texas 76106

Project A2146SW-S

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 23 of the Federal Aviation Regulations.*

*Original Product — Type Certificate Number:* A17WE  
*Make:* Aerostar  
*Model:* 600

*Description of Type Design Change:* Installation of alternate vent for fuel pressure gages according to Vought Aircraft Service Company Drawing V27002-B (2 pages), Revision B dated 7/20/71.

*Limitations and Conditions:*

This is an alternate means of compliance with Airworthiness Directive 70-23-5.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application:* July 16, 1971

*Date of issuance:* July 22, 1971

*Date reissued:*

*Date amended:*

*By direction of the Administrator*



Glen W. Welsh

Chief, Engineering and Manufacturing Branch

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

This certificate may be transferred in accordance with FAR 21.47.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_

*(Number and street)*

*(City, State, and ZIP code)*

from *(Name of grantor)* *(Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_

*(Number and street)*

*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_